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|--|-------------------------|-----------------|
| <b>TRANSMITTAL<br/>FORM</b>              | Application Number:     | 10/010,081      |
|  | Filing Date:            | 11/09/2001      |
|  | First Named Inventor:   | Didier Trono    |
|  | Art Unit:               | 1636            |
|  | Examiner Name:          | Kaushai, Sumesh |
| Total Number of Pages in this Submission | Attorney Docket Number: | CLFR:010US      |

## ENCLOSURES (check all that apply)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> References _____<br><input type="checkbox"/> Certified Copy of Priority Documents<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts/Requirements<br><input type="checkbox"/> Declaration(s) _____<br><input type="checkbox"/> Copy of Notice of Missing Parts/Requirements | <input type="checkbox"/> Drawings(s) _____<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address<br><input type="checkbox"/> Statement under 37 CFR §3.73(b)<br><input type="checkbox"/> Designation of Patent Practitioners<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)<br><input checked="" type="checkbox"/> Check in the amount of \$225.00<br><input checked="" type="checkbox"/> Authorized to be charged to deposit account if check insufficient or inadvertently omitted<br>Deposit account number: <u>50-1212/CLFR:010US</u><br><input type="checkbox"/> Sequence Statement<br><input type="checkbox"/> Paper Copy of Sequence Listing<br><input type="checkbox"/> Computer Readable Form (CRF)<br><input checked="" type="checkbox"/> Postcard<br><input type="checkbox"/> _____<br><input type="checkbox"/> _____ |
|---|---|---|

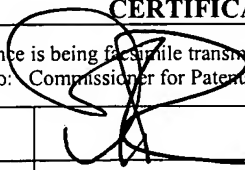
Remarks:

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                              |                 |        |
|--------------|------------------------------|-----------------|--------|
| Firm Name    | Fulbright & Jaworski, L.L.P. | Customer Number | 32425  |
| Signature    |                              |                 |        |
| Printed Name | David L. Parker              | Reg. No.        | 32,165 |
| Date         | August 24, 2005              |                 |        |

## CERTIFICATE OF TRANSMISSION/MAILING

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| Signature             |  |      |                 |
| Typed or Printed Name | David L. Parker   | Date | August 24, 2005 |